	PLEASE READ ALL INS	TRUCTIONS	BEFORE	COMPLET	ING THIS FORM.			
ند ۱		A DEPARTMENT OF STATE Katherine Harris Secretary of State VISION OF CORPORATIONS						
	UMENT # F000000049 ation Name			i chary of State				
ALAM	IO WATER REFINERS, INC.			-				
Principal P	Place of Business Mailing Add	ress		- 	ale antik karlı antik antik must karlı antik kanlı daler atış	1 1		
1		ndustrial avenue Dn IL 60010	• · · · · · · · · · · · · · · · · · · ·					
	addresses are incorrect in any way, line through incorrect incipal Office Address, If Applicable 3. New Mai		LAD	STATEMEN BOOI-200	り 			
Suite, Apt.	# etc. Suite Apt. #		Applicable 4. Date Incorporated or Qualified					
13- City & Stat	700 Hichway 906. 137	00 Highway	90 6.	5. FEI Numbe	Applied For 36-4212237 Not Applical			
Zip Zip 18	225 Country USA Zip			6. CERTIFICATE	OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Statu			
7. Names	and Street Addresses of Each Officer and/or Director (Fig	orida nonprofit corpora	ations must list at lea	ast 3 directors)				
Title(s) 1	Name of Officers and/or Directors		eet Address of Each licer and/or Director		City / State / Zip			
CD	PRITZKER, ROBERT A 225 WEST WASHING			ET CHICAGO IL 60606				
VDT	GLUTH, R C	225 WEST WAS	Shington Stree	ET CHICAGO IL 60606				
Р	WATKING, SCOTT ONKEN, JOHN D,	28W0005 INDU	STRIAL AVENUE BARRINGTON IL 60010 Shway 90 WEST SAN ANTONIO TX 78245			_		
V	GOODY, JOHN J	1	ST WASHINGTON STREET CHICAGO IL 60606					
V	Webb, Robert W	225 WEST WASHINGTO						
ļ			<u>.</u>		**** 1000.001 **** (50.00	J 		
8. Name and Address of Current Registered Agent N				9. Name and A	Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM, INC.			Street Address (P.O. Box Number Pyrt 1915) 163176					
TALLAHASSEE FL 32301			Suite, Apt. #, Etc			ົ່		
			City		State Zip Code			
10. I, being	g appointed the registered agent of the above named corp			bligations of Secti	on 607.0505, F.S. -02/13/02/010/23-022 *****750/00/****150.00	3)		
Registered	AgentMUACSONS JUDICE DA DA DA		DUR RELEV	<u>.</u>	Date			
this reir owed b	y that I am an officer or director or the receiver or trustee en statement application, the reason for dissolution has beer y the corporation have been paid and the names of indivic application is true and accurate, and my signature shall ha	eliminated, the corpo	rate name satisfies in do not qualify for	the requirements an exemption und	of section 607.0401 or 617.0401, F.S., that all fees der section 119.07(3)(i), F.S. The information indicate	ed		
	CRIEDED DO D			7	000049163170 -02/13/0201083022 ****150.00 ****150.00			
SIGNA	TURE: SIGNATURE AND TYPED OR PRINTED NAME OF	SIGNING OFFICER OR	JOHN D	ONKER	1 1 1 2 0 2 0 6 7 - 8 4 Date Daytime Phone # Dayti	25		

CSU	

ACCOUNT NO. : 0'	721	000	0000	32
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REFERENCE : 316204 4328094

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AM II:

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AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : February 4, 2002

ORDER TIME : 10:24 AM

ORDER NO. : 316204-005

CUSTOMER NO: 4328094

CUSTOMER: Ms. Christina Washington The Marmon Group, Inc. 225 West Washington St.

> Chicago, IL 60606

REINSTATEMENT

NAME: ALAMO WATER REFINERS, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS